PATENT

Attorney Docket No.: 9D-HL-25191

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Jon Arthur Roepke et al.	: Group No.: 1792 : Examiner: Riggleman, Jason Paul						
Serial No.:	10/748,485							
Filed:	December 30, 2003							
For:	CLOTHES WASHER ADDITIVE DISPENSER APPARATUS AND METHOD	: : :						
Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
TRANSMITTAL								
 Transmitted herewith is: Transmittal (3 pages) Amendment After Final Rejection in response to the final Office Action dated June 01, 2009 (12 pages) 								
	STATUS							
2. Ap _j □ □	plicant claims small entity status. is other than a small entity.							
EXTENSION OF TERM								
(a)								
	Extension for response within: first month		y Fee	small entity Fee (if applicable)				
	second month	\$ 490.00		245.00				

		th	ird month		\$ 1,110.00	\$ 5	555.00	
		fo	ourth month		\$1,730.00	\$ 8	365.00	
		fi	fth month		\$2,350.00	\$1,	175.00	
					Fee:		\$	
If an	additional exte	ension of	f time is requ	ired, please	consider this a pet	ition 1	therefor.	
		(Cl	neck and comple	ete the next it	em, if applicable)			
		therefor of exten	\$ is design now req	educted from uested.	nas already been sen the total fee due:			
Extension fee due with this request \$ OR								
(b) X Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.								
			FEE F	OR CLAIN	MS			
4. T	The fee for cla	ims (37 (C.F.R. 1.16(b	(Col. 3)	peen calculated as s	hown	below: OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	KTRA RATE FEE		ADDITIONAL OR RATE FEE	
TOTAL		MINUS		=	x \$26.00 = \$		x \$52.00 = \$	
INDEP.		MINUS		=	x \$110.00 = \$		x \$220.00 = \$	
_	FIRST PRESEN	TATION OF	MULTIPLE DEP. (CLAIM	+\$195.00 = \$		+ \$390.00 = \$	
					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$	
(a) No additional fee for Claims is required								
				OR				
(b) Total additional fee for claims required \$								
FEE PAYMENT								
5. Attached is a check in the sum of \$								
	Charg	e Deposi	t Account No	o. 01-2384	the sum of \$.			

FEE DEFICIENCY

6.	\boxtimes	If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.						
AND/OR								
	\boxtimes	If any additional fee for claims is required, charge Deposit Account No. 01-2384.						
7.		Other:						
		/Eric T. Krischke/						
		Eric T. Krischke Registration No. 42,769 ARMSTRONG TEASDALE LLP One Metropolitan Square, Suite 2600 St. Louis, MO 63102 314-621-5070						